| Name of<br>Institution | Meets<br>Definition/<br>Cert. # | Dates of<br>Stay        | Verified with Instit.?       | Correct<br>Information<br>to HCFA | Comments                                      |
|------------------------|---------------------------------|-------------------------|------------------------------|-----------------------------------|---|
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|                        |                                 |                         |                              |                                   |   |
|                        | Name of Institution             | Institution Definition/ | Institution Definition/ Stay | Institution Definition/ Stay with | Institution Definition/ Stay with Information |

Standard: 95 percent correct.

Determination: Transfer results of this sample to MB06 of the *Review Guide*.

## INSTITUTIONALIZED ENROLLEES

## WS-MB1

**Requirement:** OPL 97.054 and M+C Manual, Chapter 19 explains the requirements for identifying and reporting institutionalized members. Institutionalized enrollees are Medicare beneficiaries who resided in a skilled nursing facility (SNF), nursing facility (NF), intermediate care facility for the mentally retarded (ICF/MR), psychiatric hospital, rehabilitation hospital, long term care hospital, or swing-bed hospital, for at least 30 consecutive days (which includes as the 30th day, the last day of the month) during the month immediately prior to the month the institutionalization was reported by the M+CO Organization to HCFA.

<u>Purpose:</u> To determine if the M+CO <u>Organization</u> is properly reporting to HCFA <u>only</u> those institutionalized enrollees who resided in an institution for at least 30 consecutive days during the month immediately prior to the month the institutionalization was reported by the M+CO <u>Organization</u> to HCFA. (NOTE: Since the M+CO <u>Organization</u> is paid a higher capitation for institutionalized enrollees, reviewer must <u>assure ensure</u> that the M+CO <u>Organization</u> is properly reporting to HCFA only those institutionalized enrollees who meet the definition. <del>above.</del>)

Sample: The reviewer will develop the universe from the sample pulled to include all enrollees whom the M+CO Organization has reported to HCFA as being institutionalized during the six-month period ending with the month prior to the scheduled visit. These are identified by Transaction Code "01" on the HCFA Monthly Transaction Reply/Monthly Activity Report listings, and have a corresponding Remark of "Institutional Set. (Ensure that a portion of these institutionalized members are Employer Group Health Plan members so that this subset may be) evaluated. From the universe, the reviewer will select 30 cases with replacement in accordance with random selection methods discussed in the Review Guide Instructions, under Sampling Methodology. (Note: During focused reviews, HCFA staff may elect to increase sample sizes to 100 cases or more with replacement, as deemed appropriate by the Agency.) Five to seven (5-7) days before the site visit, the reviewer will notify the M+CO Organization—of the specific units of analysis. The M+CO Organization—shall have all necessary documentation related to the enrollee's institutionalization, including length of stay, name and phone number of institution, and documentation related to the M+CO organization or verification of institutional status for the units of analysis available upon the reviewer's arrival onsite.

In addition to verifying the M+CO's Organization's written documentation supporting the enrollee's length of stay, contact the institutions in which all of the enrollees in the sample allegedly resided to verify the dates of institutionalization. Written confirmation should be provided by the institution of the enrollee' institutional status. Reviewers should contact the institution, establish a contact person to receive the list of names and confirm the institutional status, and fax the list to the institution. If you do not receive confirmation from the institution, contact them and request the documentation. Written confirmation provides the Division of Performance Review and Office of Inspector General with a paperwork trail. The reviewer should confirm the entire period of institutionalization reported by the M+CO for the enrollees in the sample. Ensure that the admission date, discharge date, and entire length of stay correspond with the payment. Where multiple enrollees are reported in the same institution, a single written confirmation to verify multiple cases should be used. Where the 95% standard for accuracy is not substantially met, the RO should consider a more extensive audit of the M+CO's institutional reporting and its accuracy. Development of proper payment may be necessary. Contact with the CO Plan Manager and the Division of Performance Review of CHPP/HPPAMMCG should be undertaken, if an audit is initiated due to significant inaccuracies in institutional reporting by the M+CO, to determine if suspension of institutional adjustments should be undertaken until corrective action by the plan is initiated.

## **Column Explanation:**

Name/HI Number: Self-explanatory. Identifier may be the claim number, as defined by the M+CO's Organization's claims processing system; in addition, identifier should also be used.

Name of Institution: Self-explanatory.

Meets Definition? Does the facility meet the definition of "institution?" Ensure that the institution is a skilled nursing facility (SNF), nursing facility (NF), intermediate care facility for the mentally retarded (ICF/MR), psychiatric hospital, rehabilitation hospital, long term care hospital, or swing-bed hospital. Be aware that at Senior/Life Care Centers, people move between "institutions" section and regular apartment section of facility; verify to assure that individual is/was in institutional section the required time. Record certification number.

**Dates of Stay:** What were the dates of stay? Verify the all dates the enrollees were in the institution - which must be the month immediately before the month the information was reported to HCFA. Verify the entire period for which the M+CO claimed institutionalized status which includes the month selected in the sample. Dates should include the month immediately before the month the information was reported to HCFA. If it appears that the M+CO claimed institutionalized status for beneficiaries in the sample that cannot be verified by the institution, check with the M+CO to determine if the member was in another or an additional qualifying institution during the period in question.

**Verified with Institution?** Did M+CO Organization verify information with the institution? If this enrollee was one of the 30 selected cases, note that contact was made with the institution in which they allegedly resided.

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**Corr Information to HCFA?** Did M+C Organization report correct information to HCFA? Once the dates of stay have been verified, note whether or not the institutionalized status was correctly reported to HCFA. Ensure that the dates accounted for at least 30 consecutive days in the institution which includes as the 30th day, the last day of the month prior to the month for which the information was reported to HCFA.

**Comments:** Self-explanatory.

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